

PERSONAL EXPLANATION

Mr. CAMPBELL. Madam Speaker, I regret that I was not present for rollcall votes Nos. 16 and 16 because I was unavoidably detained. Had I been present, I would have voted "yes" on both counts.

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PERSONAL EXPLANATION

Mr. PORTER. Madam Speaker, due to air transport delays, I was absent for the votes on H. Con. Res. 247, expressing the Sense of Congress regarding the importance of organ, tissue, bone marrow, and blood donation and supporting National Donor Day and H. Con. Res. 76, recognizing the social problem of child abuse and neglect and supporting efforts to enhance public awareness of it. Had I been present, I would have supported the passage of both of these concurrent resolutions.

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PERSONAL EXPLANATION

Ms. KILPATRICK. Madam Speaker, due to official business in the 15th Congressional District of Michigan, I was unable to record my votes for rollcall Nos. 16 and 17 considered today. Had I been present, I would have voted "aye" on rollcall 16, H. Con. Res. 247, Expressing the Sense of Congress Regarding the Importance of Organ, Tissue, Bone Marrow, and Blood Donation and Supporting National Donor Day and "aye" on rollcall No. 17, H. Con. Res. 76, Recognizing The Social Problem of Child Abuse and Neglect and Supporting Efforts to Enhance Public Awareness of it.

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SPECIAL ORDERS

The SPEAKER pro tempore (Mrs. BIGGERT). Under the Speaker's announced policy of January 6, 1999, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

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The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Georgia (Mr. NORWOOD) is recognized for 5 minutes.

(Mr. NORWOOD addressed the House. His remarks will appear hereafter in the Extension of Remarks.)

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DEVASTATING TORNADOES HIT SOUTHWEST GEORGIA

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Georgia (Mr. BISHOP) is recognized for 5 minutes.

Mr. BISHOP. Madam Speaker, tonight I ask my colleagues in the House of Representatives and the people of our Nation to join me in prayer for the families of those who suffered grievous losses as a result of tornadoes last night that brought widespread devastation and extensive loss of life to rural areas of Mitchell, Grady, Colquitt and Taft counties in a part of southwest Georgia that I have the privilege of representing.

This is one of the worst natural disasters in our State's history. The num-

ber of people whose lives were lost continue to mount throughout the day; and, as yet, the total has still not been definitely determined. By now, my colleagues have probably seen images of this terrible disaster in the national news. These are rural residential neighborhoods that now look like battle zones, with home after home turned into rubble. To say the least, it is a heartbreaking sight.

I know the people of my area of Georgia can count on the support of my colleagues as we mobilize all of the available resources, public and private, to provide the emergency assistance that is going to be needed. Our Congressional office stands ready to provide any help and guidance that individuals, businesses, and governmental entities need to gain access to much needed disaster relief assistance.

I want to take this opportunity to commend all of the government leaders in the impacted counties who are responding so effectively and valiantly and the municipal leaders in those areas who are lending their assistance. I also want to commend the many private citizens who are helping to provide relief for their neighbors, as well as the private organizations that are involved in this relief effort.

I certainly commend Governor Roy Barnes and everyone at our State level, including Georgia Emergency Management Agency Director Gary McConnell and all of his people over at GEMA, who have sprung into action on so many fronts and, along with Governor Barnes, have started the process leading to a major disaster declaration.

And those of us from Georgia, Madam Speaker, are also thankful for the efforts of the Federal Emergency Management Agency and its fine Director James Lee Witt, who is working hand-in-glove with state and community leaders in responding decisively to this disaster.

Madam Speaker, this is a time for all of our communities to pull together. After severe flooding struck our area of Georgia just a few years ago, including the areas that have been struck by these terrible tornadoes, I quoted the Apostle Paul, who said, "God's strength is made perfect in weakness."

It is with this strength that we in southwest Georgia will confront this tragedy and come together in our collective faith, our hope, and our charitable spirit to bring comfort to those who have suffered and to begin the work of rebuilding our communities.

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PRESCRIPTION DRUG PRICES

The SPEAKER pro tempore (Mrs. BIGGERT). Under a previous order of the House, the gentleman from Minnesota (Mr. GUTKNECHT) is recognized for 5 minutes.

Mr. GUTKNECHT. Madam Speaker, I rise tonight to talk about a very serious issue confronting our Nation. In

the last 4 years, the price of prescription drugs in the United States has increased by 56 percent. In the last year alone, prescription drug prices in the United States have increased by 15.6 percent. That is at a time when our inflation rate is running somewhere around 2 or 2½ percent. Madam Speaker, it is time for Congress to take some action to try and stem this ever increasing price for prescription drugs. All of us here in the House and all of us in Washington know who bears the burden of those tremendous increases in prices. It is principally the senior citizens here in the United States.

Madam Speaker, I want to talk tonight about the differentials between the United States, what is happening here and what is happening in other countries. Many of us have recently read about seniors who are boarding buses in our States and going to Canada to buy their prescription drugs. It is happening in Minnesota, it is happening in Idaho, Wyoming, Montana, and all across and throughout the northeastern United States as well.

Let me try to explain how much of a differential there is in the price of prescription drugs. Let us take a relatively common, one of the more commonly prescribed drugs in the United States. It is a drug called Prilosec. Prilosec is prescribed principally for ulcers or people who have an acid condition in their stomach. A 30-day supply, if one goes and gets a prescription in Minneapolis, Minnesota, at almost any pharmacy, and it is not the pharmacist, they only get about a 3 or \$4 per-prescription fee on it, so it is not the pharmacist that is driving these prices. But a 30-day supply in Minnesota, Minneapolis, is \$99.95.

You buy that same prescription in Winnipeg, Manitoba for exactly the same drug manufactured by exactly the same company in exactly the same plant under the exact same FDA approval, you buy that drug, the Prilosec in Manitoba, and it is \$50.88. But if you go down to Mexico, you can buy exactly the same drug manufactured in exactly the same plant under the exact same FDA approval for \$17.50.

Let me read for my colleagues what George Halvorson who is the chairman of one of our larger HMOs in Minneapolis had to say, and this is a direct quote:

If we could only get half the price break that Canadians get, our plan alone could have saved our members nearly \$35 million last year.

Madam Speaker, I estimate that in Medicaid alone, the U.S. Government could save \$1.8 billion if we could get half the break that Canadians are currently getting for exactly the same drugs. This is not to mention the fact that we currently have 68 million prescriptions filled each year by the VA. Madam Speaker, we are talking about billions and billions of dollars that we could save if we would simply allow free market principles to work.